

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

WESTERN DISTRICT OF WASHINGTON

Case number *(if known)*

Chapter

11☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Shilo Inn, Idaho Falls, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 82-0494815

4. Debtor's address Principal place of business

780 Lindsay Blvd  
Idaho Falls, ID 83402

Number, Street, City, State &amp; ZIP Code

Bonneville

County

Mailing address, if different from principal place of business

c/o Shilo Management Corporation  
11707 NE Airport Way  
Portland, OR 97220

P.O. Box, Number, Street, City, State &amp; ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State &amp; ZIP Code

5. Debtor's website (URL) www.shiloinns.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify: \_\_\_\_\_

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known)

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☐ No
- ☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<b>See Attachment</b>	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known)

**11. Why is the case filed in this district?***Check all that apply:*

- ☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☒ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other**Where is the property?**

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information****13. Debtor's estimation of available funds***Check one:*☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known) \_\_\_\_\_

**Request for Relief, Declaration, and Signatures****WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 2, 2020**  
MM / DD / YYYY

DocuSigned by:

**X** Mark S. Hemstreet  
Signature of authorized representative of debtor**Mark S. Hemstreet**  
Printed nameTitle **Secretary of Shilo Idaho Falls Corp.,  
Manager****18. Signature of attorney****X** /s/ Bryan T. Glover  
Signature of attorney for debtorDate **November 2, 2020**  
MM / DD / YYYY**Bryan T. Glover**  
Printed name**Stoel Rives LLP**  
Firm name**600 University Street, Suite 3600  
Seattle, WA 98101**  
Number, Street, City, State & ZIP CodeContact phone **(206) 624 0900**

Email address \_\_\_\_\_

**WSBA No. 51045**  
Bar number and State

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known)

Fill in this information to identify your case:

United States Bankruptcy Court for the:  
WESTERN DISTRICT OF WASHINGTON

Case number (if known) Chapter **11**

☐ Check if this an amended filing

FORM 201. VOLUNTARY PETITION  
Pending Bankruptcy Cases Attachment

Debtor	<b>Shilo Inn, Nampa Suites, LLC</b>	Relationship to you	<b>Affiliate</b>
District	<b>Western District of Washington</b>	When	<b>10/15/20</b>
Case number, if known			<b>20-42349</b>
Debtor	<b>Shilo Inn, Ocean Shores, LLC</b>	Relationship to you	<b>Affiliate</b>
District	<b>Western District of Washington</b>	When	<b>10/15/20</b>
Case number, if known			<b>20-42348</b>

**Fill in this information to identify the case:**Debtor name **Shilo Inn, Idaho Falls, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF  
WASHINGTON**

Case number (if known): \_\_\_\_\_

☐ Check if this is an  
amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders** 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Bob Tiernan PO Box 366 Diablo, CA 94528	503-697-7266					\$200.00
Booking.com B.V. BANK OF AMERICA LOCKBOX SERVICES PO BOX 740401 LOS ANGELES, CA 90074-0401	616-254-3517					\$19,162.03
Cartridge World Gresham 10115 SW NIMBUS AVE ST 600 TIGARD, OR 97223						\$99.95
CenturyLink PO BOX 2956 PHOENIX, AZ 85062-2956						\$3,883.89
City of Idaho Falls (Electricity/Garbage 308 Constitution Way IDAHO FALLS, ID 83402						\$3,380.00
City of Idaho Falls (Water/Sewer) 308 Constitution Way IDAHO FALLS, ID 83402						\$1,200.00
Clear Channel Outdoor PO BOX 847247 DALLAS, TX 75284-7247	877-422-8326					\$3,906.83

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Cogency Global 10 EAST 40TH ST 10TH FL NEW YORK, NY 10016</b>						<b>\$119.00</b>
<b>Culligan Water Conditioning 433 MAY ST IDAHO FALLS, ID 83401-2619</b>	<b>208-522-2500</b>					<b>\$139.56</b>
<b>Diversified Containers LLC 2184 CHANNINO WAY BOX 241 IDAHO FALLS, ID 83404</b>						<b>\$132.50</b>
<b>Ecolab PO BOX 100512 PASADENA, CA 91189-0512</b>	<b>800-352-5326</b>					<b>\$270.34</b>
<b>En Pointe Technologies Sales PO BOX 740545 LOS ANGELES, CA 90074-0545</b>	<b>310-337-5200</b>					<b>\$225.82</b>
<b>Expedia Inc PO BOX 844120 DALLAS, TX 75284-4120</b>	<b>888-397-1786</b>					<b>\$6,604.91</b>
<b>Fire Protection Services 9950 SW ARCTIC DRIVE BEAVERTON, OR 97005</b>	<b>503-590-3732</b>					<b>\$260.10</b>
<b>Harbor Linen PO Box 3510 Cherry Hill, NJ 08304</b>	<b>856-435-2000</b>					<b>\$632.76</b>
<b>Liberty Mutual Insurance PO BOX 85307 SAN DIEGO, CA 92186-5307</b>	<b>503-239-5800</b>					<b>\$2,148.00</b>
<b>Positive Technologies 4329 NE KILLINGSWORTH STE A PORTLAND, OR 97218</b>	<b>503-284-6565</b>					<b>\$471.00</b>

Debtor **Shilo Inn, Idaho Falls, LLC**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Sceptre Hospitality Resources PO BOX 4356 DEPT 1936 HOUSTON, TX 77210-4356</b>	<b>713-333-9944</b>					<b>\$867.19</b>
<b>Skytouch International 4225 E WINDROSE DRIVE PHOENIX, AZ 85032</b>	<b>855-832-3167</b>					<b>\$3,805.25</b>
<b>World Cinema Inc PO BOX 733288 DALLAS, TX 75373-3288</b>	<b>713-266-2686</b>					<b>\$9,496.55</b>



**United States Bankruptcy Court  
Western District of Washington**

In re **Shilo Inn, Idaho Falls, LLC**

Debtor(s)

Case No.

Chapter

**11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Mark S. Hemstreet Shilo Management Corporation 11707 NE Airport Way Portland, OR 97220</b>	<b>Member</b>	<b>99%</b>	
<b>Shilo Idaho Falls Corp. 11707 NE Airport Way Portland, OR 97220</b>	<b>Member</b>	<b>1%</b>	

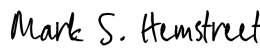
**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Secretary of Shilo Idaho Falls Corp., Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **November 2, 2020**

Signature

DocuSigned by:

2220BC13CC3A4B2...  
**Mark S. Hemstreet**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court  
Western District of Washington**

In re **Shilo Inn, Idaho Falls, LLC**

Debtor(s)

Case No.

Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

I, the Secretary of Shilo Idaho Falls Corp., Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **November 2, 2020**

DocuSigned by:

*Mark S. Hemstreet*

**Mark S. Hemstreet** Secretary of Shilo Idaho Falls Corp., Manager  
Signer/Title

BOB TIERNAN  
PO BOX 366  
DIABLO, CA 94528

BOOKING.COM B.V.  
BANK OF AMERICA LOCKBOX SERVICES  
PO BOX 740401  
LOS ANGELES, CA 90074-0401

CARTRIDGE WORLD GRESHAM  
10115 SW NIMBUS AVE ST 600  
TIGARD, OR 97223

CENTURYLINK  
PO BOX 2956  
PHOENIX, AZ 85062-2956

CITY OF IDAHO FALLS (ELECTRICITY/GARBAGE)  
308 CONSTITUTION WAY  
IDAHO FALLS, ID 83402

CITY OF IDAHO FALLS (WATER/SEWER)  
308 CONSTITUTION WAY  
IDAHO FALLS, ID 83402

CLEAR CHANNEL OUTDOOR  
PO BOX 847247  
DALLAS, TX 75284-7247

COGENCY GLOBAL  
10 EAST 40TH ST 10TH FL  
NEW YORK, NY 10016

CULLIGAN WATER CONDITIONING  
433 MAY ST  
IDAHO FALLS, ID 83401-2619

DEUTSCHE BANK TRUST CO. AMERIC  
HOLDERS OF CITIGROUP CM TRUST  
C/O RIALTO CAPITAL ADVISORS  
200 S. BISCAYNE BL, STE  
MIAMI, FL 33131

DIVERSIFIED CONTAINERS LLC  
2184 CHANNINO WAY BOX 241  
IDAHO FALLS, ID 83404

ECOLAB  
PO BOX 100512  
PASADENA, CA 91189-0512

EN POINTE TECHNOLOGIES SALES  
PO BOX 740545  
LOS ANGELES, CA 90074-0545

EXPEDIA INC  
PO BOX 844120  
DALLAS, TX 75284-4120

FIRE PROTECTION SERVICES  
9950 SW ARCTIC DRIVE  
BEAVERTON, OR 97005

HARBOR LINEN  
PO BOX 3510  
CHERRY HILL, NJ 08304

LIBERTY MUTUAL INSURANCE  
PO BOX 85307  
SAN DIEGO, CA 92186-5307

MARK S. HEMSTREET  
11707 NE AIRPORT WAY  
PORTLAND, OR 97220

POSITIVE TECHNOLOGIES  
4329 NE KILLINGSWORTH STE A  
PORTLAND, OR 97218

RIALTO CAPITAL ADVISORS  
200 S. BISCAYNE BL, STE  
MIAMI, FL 33131

SCEPTRE HOSPITALITY RESOURCES  
PO BOX 4356 DEPT 1936  
HOUSTON, TX 77210-4356

SHILO FRANCHISE INTERNATIONAL LLC  
11707 NE AIRPORT WAY  
PORTLAND, OR 97220

SHILO MANAGEMENT CORP  
11707 NE AIRPORT WAY  
PORTLAND, OR 97220

SKYTOUCH INTERNATIONAL  
4225 E WINDROSE DRIVE  
PHOENIX, AZ 85032

SOJERN INC.  
18135 BURKE ST, STE 300  
OMAHA, NE 68022

WORLD CINEMA INC  
PO BOX 733288  
DALLAS, TX 75373-3288

**United States Bankruptcy Court  
Western District of Washington**

In re **Shilo Inn, Idaho Falls, LLC**

Debtor(s)

Case No.

Chapter

**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Shilo Inn, Idaho Falls, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

**November 2, 2020**

Date

/s/ Bryan T. Glover**Bryan T. Glover**

Signature of Attorney or Litigant

Counsel for **Shilo Inn, Idaho Falls, LLC****Stoel Rives LLP****600 University Street, Suite 3600, Seattle,  
WA 98101****Telephone 206.624.0900**

**SHILO IDAHO FALLS CORP.**

**SECRETARY'S CERTIFICATE**

I, Mark S. Hemstreet, am the duly elected, qualified and acting Secretary of Shilo Idaho Falls Corp., an Oregon corporation (the "Corporation"), and in such capacity, I have access to and the authority to certify the books and records of the Corporation. I hereby certify that the attached is a true and correct copy of the resolutions adopted at a special meeting of the Board of Directors of the Corporation on October 29, 2020, which resolutions have not been in any way amended, modified, revoked or rescinded since their adoption and remain in full force and effect as of the date hereof.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 29<sup>th</sup> day of October, 2020.

  
\_\_\_\_\_  
Mark S. Hemstreet, Secretary

**UNANIMOUS RESOLUTION OF THE BOARD OF DIRECTORS**  
**OF SHILO IDAHO FALLS CORP.**

A special meeting of the board of directors of Shilo Idaho Falls Corp., an Oregon corporation (the "Corporation") was held on October 29, 2020, at which the following resolution was duly enacted, and the same remains in full force and effect, without modification, unless and until a further resolution to the contrary is adopted:

WHEREAS, the Corporation is the manager and a member of Shilo Inn, Idaho Falls, LLC (the "Company")

WHEREAS, the Company has a loan secured by certain real property located at 780 Lindsay Blvd, Idaho Falls, Idaho 83402.

WHEREAS, the lender on the loan has a pending foreclosure sale scheduled with regards to the property and the loan.

RESOLVED, that the Corporation in its capacity as manager and as a member of the Company hereby authorizes the Company to file for bankruptcy protection under the United States Bankruptcy Code.

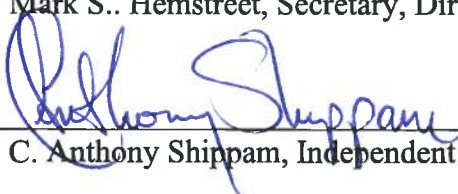
FURTHER RESOLVED, the Company is authorized to adopt any further resolutions and take all further necessary actions to file for bankruptcy protection.

Dated: October 29, 2020

By: Shilo Idaho Falls Corp., an Oregon Corporation

By:   
Shannon M. Hemstreet, President, Director

By:   
Mark S. Hemstreet, Secretary, Director

By:   
C. Anthony Shippam, Independent Director



**UNANIMOUS RESOLUTION OF MEMBERS AND MANAGER AUTHORIZING**

**CHAPTER 11 BANKRUPTCY FILING**

A special meeting of the members of Shilo Inn, Idaho Falls, LLC, an Oregon limited liability company (the “Company”) was held on October 29, 2020, at which the following resolutions were duly enacted, and the same remain in full force and effect, without modification, unless and until a further resolution to the contrary is adopted:

RESOLVED, that Larry Chank, or his designee (“Chank”), shall serve as the Designated Officer for the Company during the pendency of its Chapter 11 bankruptcy case

FURTHER RESOLVED, that as the Designated Officer, Chank is hereby authorized and directed on behalf of and in the name of the Company to execute a Chapter 11 bankruptcy petition and all related documents and papers on behalf of the Company in order to enable the Company to commence its Chapter 11 bankruptcy case;


FURTHER RESOLVED, that as the Designated Officer, Chank is hereby authorized and directed on behalf of and in the name of the Company to execute and file and to cause counsel to the Company to prepare with the assistance of the Company as appropriate all petitions, schedules, lists and other papers, documents and pleadings in connection with the Company’s bankruptcy case that Chank deems appropriate for the Company;

FURTHER RESOLVED, that the law firm of Levene, Neale, Bender, Yoo & Brill L.L.P. (“LNBYB”) shall be retained as lead bankruptcy counsel to the Company for purposes of filing the Chapter 11 bankruptcy case for the Company and representing the Company in its Chapter 11 bankruptcy case. The Designated Officer is hereby authorized and directed to execute an application for the Company to employ LNBYB as lead bankruptcy counsel to the Company in connection with the Company's Chapter 11 bankruptcy case;

FURTHER RESOLVED, that the law firm of Stoel Rives LLP (“SR”) shall be retained as local bankruptcy counsel to the Company for purposes of assisting LNBYB with the

Chapter 11 bankruptcy case for the Company and assisting LNBYB with representing the Company in its Chapter 11 bankruptcy case. The Designated Officer is hereby authorized and directed to execute an application for the Company to employ SR as local bankruptcy counsel to the Company in connection with the Company's Chapter 11 bankruptcy case.

Dated: October 29, 2020

By:   
Mark Hemstreet  
Member holding 99.9% membership interests

By: Shilo Idaho Falls Corp., an Oregon Corporation  
Manager and Member holding 0.1% membership interests

By: *[see corporate resolution adopted by board of directors]*  
Shannon M. Hemstreet, President, Director

By: *[see corporate resolution adopted by board of directors]*  
Mark S.. Hemstreet, Secretary, Director

By: *[see corporate resolution adopted by board of directors]*  
C. Anthony Shippam, Independent Director

JCB H5SSUMML  
STR 5SSUMML  
ROUNDING 1

SHILO INN IDAHO FALLS, LLC  
SUMMARY STATEMENT OF INCOME - INCOME TAX-BASIS  
MONTHS ENDING 9/30/20 (UNAUDITED)

RUN DATE 10/21/20 PAGE 0001 (GLPRINT)  
RUN TIME 09:36:26

CURRENT MONTH								YEAR TO DATE							
ACTUAL	%	BUDGET	%	VARIANCE	%	PRIOR YEAR	%	ACTUAL	%	BUDGET	%	VARIANCE	%	PRIOR YEAR	%
70,630	99.0	0		70,630	0.0	263,188	96.5	X1100	REVENUE	454,219	95.5	0		1,787,073	95.5
54	0.1	0		54	0.0	1,413	0.5	X3310	ROOMS	1,676	0.4	0		12,251	0.7
636	0.9	0		636	0.0	8,022	2.9	X3315	OTHER INCOME	19,945	4.2	0		72,197	3.9
									RENT						
71,320	100.0	0		71,320	0.0	272,623	100.0		TOTAL REVENUE	475,839	100.0	0		1,871,521	100.0
									DEPARTMENTAL PROFIT						
53,938	76.4	0		53,938	0.0	199,695	75.9	X1000	ROOMS	266,625	58.7	0		1,264,536	70.8
685-		0		685-	0.0	517-		X2000	TELEPHONE	4,278-		0		4,549-	
690	100.0	0		690	0.0	9,435	100.0	X3000	OTHER	21,579	99.8	0		84,332	99.9
									TOTAL DEPARTMENTAL PROFIT	283,926	59.7	0		1,344,320	71.8
53,943	75.6	0		53,943	0.0	208,612	76.5		SALES & MARKETING	39,170	8.2	0		64,882	3.5
3,029	4.2	0		3,029-	0.0	10,715	3.9	X4000	REPAIRS & MAINTENANCE	111,071	23.3	0		142,990	7.6
8,196	11.5	0		8,196-	0.0	21,334	7.8	X5000	ADMINISTRATION & GENERAL	225,225	47.3	0		199,248	10.6
18,722	26.3	0		18,722-	0.0	19,022	7.0	X6000	ENERGY	49,564	10.4	0		66,917	3.6
5,289	7.4	0		5,289-	0.0	6,814	2.5	X7000							
									TOTAL OVERHEAD EXPENSE	425,030	89.3	0		474,037	25.3
35,236	49.4	0		35,236-	0.0	57,885	21.2		GROSS OPERATING PROFIT	141,104-	29.7	0		870,283	46.5
18,707	26.2	0		18,707	0.0	150,727	55.3		OTHER FIXED EXPENSES						
0		0		0	0.0	0		X8000	OTHER	0		0		2,056	0.1
4,920	6.9	0		4,920-	0.0	5,887	2.2	X8200	INSURANCE	48,950	10.3	0		43,887	2.3
11,025	15.5	0		11,025-	0.0	11,490	4.2	X8300	TAXES	97,816	20.6	0		103,408	5.5
0		0		0	0.0	0		5950	INTEREST	0		0		4,369	0.2
25,624	35.9	0		25,624-	0.0	25,856	9.5	5951	INTEREST - MORTGAGE	230,620	48.5	0		232,389	12.4
2,117	3.0	0		2,117-	0.0	8,837	3.2	X8880	MANAGEMENT FEE	14,295	3.0	0		65,837	3.5
									TOTAL OTHER EXPENSE	391,681	82.3	0		451,946	24.1
43,687	61.3	0		43,687-	0.0	52,070	19.1		OTHER INCOME						
									TOTAL INC BEFORE DEPRN FEES/AMORT	532,786-	112.0	0		418,337	22.4
24,980-	35.0	0		24,980-	0.0	98,657	36.2		DEFERRED ATTEN	64,758	13.6	0		174,308	9.3
7,195	10.1	0		7,195-	0.0	19,368	7.1	9300							
									TOTAL NET INCOME/ (LOSS)	597,544-	125.6	0		244,029	13.0
32,175-	45.1	0		32,175-	0.0	79,290	29.1		STATISTICS						
									ROOMS AVAILABLE	44,388		0		44,226	
4,860		0		4,860	0	4,860		4000A	ROOMS SOLD	5,470		0		17,733	
738		0		738	0	2,466		4000R	ROOMS OCCUPIED	5,923		0		18,226	
787		0		787	0	2,605		4000O	PERCENTAGE OF OCCUPANCY	12.3		0.0		40.1	
15.2	0.0	0.0		15.2	0.0	50.7		4000P	AVERAGE DAILY RATE	83.04		0.00		100.78	
95.70	0.00	0.00		95.70	0.00	106.73		4000AR	REVENUE PER AVAILABLE ROOM	10.23		0.00		40.41	
14.53	0.00	0.00		14.53	0.00	54.15		4000FP	COST PER OCCUPIED ROOM	31.67		0.00		28.67	
21.21	0.00	0.00		21.21	0.00	24.37		4000CP							

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SHILO INN IDAHO FALLS, LLC  
SUMMARY STATEMENT OF INCOME--INCOME TAX-BASIS  
MONTHS ENDING 12/31/19 (UNAUDITED)

RUN DATE 2/20/20 PAGE 0001 (GL PRTN)  
RUN TIME 12:44:38

CURRENT MONTH								YEAR-TO-DATE									
ACTUAL	%	BUDGET	%	VARIANCE	%	PRIOR YEAR	%			ACTUAL	%	BUDGET	%	VARIANCE	%	PRIOR YEAR	%
REVENUE																	
57,773	87	0		57,773	0	91,918	90.6	X1100	ROOMS	1,986,544	94.7	0		1,986,544	0	2,447,879	95.7
646	1	0		646	0	1,474	1.5	X3310	OTHER INCOME	14,608	0.7	0		14,608	0	19,665	0.8
8,000	12	0		8,000	0	8,032	7.9	X3315	RENT	96,307	4.6	0		96,307	0	90,212	3.5
66,419	100	0		66,419	0	101,424	100	TOTAL REVENUE		2,097,459	100	0		2,097,459	0	2,557,757	100
DEPARTMENTAL PROFIT																	
18,185	31.5	0		18,185	0	-23,039	25.1	X1000	ROOMS	1,342,367	67.6	0		1,342,367	0	1,704,459	69.6
-500		0		-500	0	-953		X2000	TELEPHONE	-5,622		0		-5,622	0	-7,304	
8,646	100	0		8,646	0	9,470	99.6	X3000	OTHER	110,799	99.9	0		110,799	0	109,540	99.7
26,332	39.6	0		26,332	0	-14,522	14.3	TOTAL DEPARTMENTAL PROFIT		1,447,545	69	0		1,447,545	0	1,806,695	70.6
7,004	10.5	0		-7,004	0	7,612	7.5	X4000	SALES & MARKETING	82,053	3.9	0		-82,053	0	128,936	5
14,768	22.2	0		-14,768	0	152,593	150.5	X5000	REPAIRS & MAINTENANCE	196,441	9.4	0		-196,441	0	344,541	13.5
13,730	20.7	0		-13,730	0	10,137	10	X6000	ADMINISTRATION & GENERAL	239,722	11.4	0		-239,722	0	207,088	8.1
8,621	13	0		-8,621	0	9,913	9.8	X7000	ENERGY	94,166	4.5	0		-94,166	0	102,914	4
44,123	66.4	0		-44,123	0	180,255	177.7	TOTAL OVERHEAD EXPENSE		612,382	29.2	0		-612,382	0	783,479	30.6
-17,791	26.8	0		-17,791	0	-194,777	192	GROSS OPERATING PROFIT		835,162	39.8	0		835,162	0	1,023,216	40
OTHER FIXED EXPENSES																	
0		0		0	0	0		X8000	OTHER	2,056	0.1	0		-2,056	0	0	
5,887	8.9	0		-5,887	0	4,371	4.3	X8200	INSURANCE	61,549	2.9	0		-61,549	0	48,769	1.9
7,724	11.6	0		-7,724	0	50,123	49.4	X8300	TAXES	130,345	6.2	0		-130,345	0	156,973	6.1
0		0		0	0	0		5950	INTEREST	4,369	0.2	0		-4,369	0	-212	
25,624	38.6	0		-25,624	0	26,090	25.7	5951	INTEREST - MORTGAGE	309,262	14.7	0		-309,262	0	310,039	12.1
1,996	3	0		-1,996	0	2,798	2.8	X8880	MANAGEMENT FEE	72,715	3.5	0		-72,715	0	73,893	2.9
72,581	47.7	0		-72,581	0	68,735	43.8	TOTAL OTHER EXPENSE		878,414	28.6	0		-878,414	0	864,754	21.9
OTHER INCOME																	
-47,836	31.4	0		-47,836	0	-369,576	235.4	TOTAL INC BEFORE DEPN/FEES/AMOR		326,174	10.6	0		326,174	0	613,699	15.6
11,528	7.6	0		-11,528	0	6,435	4.1	9300	DEPRECIATION	138,335	4.5	0		-138,335	0	117,753	3
0		0		0	0	19,417	12.4	9500	LOAN FEE AMORTIZATION	0		0		0	0	19,417	0.5
-59,364	39	0		-59,364	0	-395,428	251.8	TOTAL NET INCOME/ (LOSS)		187,839	6.1	0		187,839	0	476,529	12.1
STATISTICS																	
4,681		0		4,681	0	4,712		4000A	ROOMS AVAILABLE	55,138		0		55,138	0	55,480	
1,887		0		1,887	0	1,627		4000R	ROOMS SOLD	25,305		0		25,305	0	31,968	
1,891		0		1,891	0	1,637		4000O	ROOMS OCCUPIED	25,506		0		25,506	0	32,173	
40.3		0		40.3	0	34.5		4000%	PERCENTAGE OF OCCUPANCY	45.9		0		45.9	0	57.6	
79.98		0.00		79.98	0.00	94.09		4000AR	AVERAGE DAILY RATE	119.73		0.00		119.73	0.00	121.79	
32.24		0.00		32.24	0.00	32.49		4000R P	REVENUE PER AVAILABLE ROOM	54.95		0.00		54.95	0.00	70.18	

**SHILO INN IDAHO FALLS, LLC**  
**BOOK VALUE (INCOME TAX-BASIS) AND MARKET VALUE BALANCE SHEET**  
**PERIOD ENDING 12/31/19 (UNAUDITED)**

<b>ASSETS</b>	<b>BOOK VALUE</b>	<b>MARKET VALUE</b>
<b>CURRENT ASSETS</b>		
TOTAL CASH	33,771	33,771
PREPAID EXPENSES	4,579	4,579
DEBT SERVICE RESERVE	225,241	225,241
ACCOUNTS RECEIVABLE	12,335	12,335
<b>TOTAL CURRENT ASSETS</b>	<b>275,925</b>	<b>275,925</b>
<b>FIXED ASSETS</b>		
LAND	900,656	
LAND IMPROVEMENTS	497,361	
BUILDING	7,281,236	
FURNITURE	700,632	
FIXTURES & EQUIPMENT	2,519,716	
RESTAURANT EQUIPMENT	165,509	
SIGNS	165,021	
REORGANIZATION COSTS	269,763	
<b>TOTAL GROSS FIXED ASSETS</b>	<b>12,499,894</b>	
ACCUMULATED DEPR & AMORT	(10,029,703)	
<b>NET FIXED ASSETS</b>	<b>2,470,191</b>	<b>16,000,000</b>
<b>OTHER ASSETS</b>		
LOAN FEES	135,169	135,169
LINENS	47,418	47,418
FRANCHISE DEPOSIT	14,580	14,580
OTHER DEPOSITS / OTHER ASSETS	1,785	1,785
SUSPENSE	4,774	4,774
<b>TOTAL OTHER ASSETS</b>	<b>203,726</b>	<b>203,726</b>
<b>TOTAL ASSETS</b>	<b>\$ 2,949,842</b>	<b>\$ 16,479,651</b>
<b>LIABILITIES AND EQUITY</b>		
<b>CURRENT LIABILITIES</b>		
TRADE PAYABLE	214,288	214,288
TOTAL ACCRUED EXPENSES	125,722	125,722
<b>TOTAL CURRENT LIABILITIES</b>	<b>340,010</b>	<b>340,010</b>
<b>L-T LIABILITIES</b>		
N/P-MORTGAGE	5,007,695	5,007,695
<b>TOTAL L-T LIABILITIES</b>	<b>5,007,695</b>	<b>5,007,695</b>
<b>OTHER LIABILITIES</b>		
RELATED PARTY PAYABLE	26,397	26,397
OTHER LIABILITIES	44,031	44,031
<b>TOTAL OTHER LIABILITIES</b>	<b>70,428</b>	<b>70,428</b>
<b>TOTAL EQUITY</b>	<b>(2,468,291)</b>	<b>11,061,518</b>
<b>TOTAL LIABILITIES AND EQUITY</b>	<b>\$ 2,949,842</b>	<b>\$ 16,479,651</b>

**NOTES** (Substantially all disclosures omitted):

Internally prepared and not subjected to a compilation, review or audit; no assurance is provided.

This information is provided for discussion purposes only and is not presented in compliance with GAAP.

Yearend entries are not complete and are not expected to be material.

**SHILO INN IDAHO FALLS, LLC**  
**BOOK VALUE (INCOME TAX-BASIS) AND MARKET VALUE BALANCE SHEET**  
**PERIOD ENDING 9/30/20 (UNAUDITED)**

<b>ASSETS</b>	<b>BOOK VALUE</b>	<b>MARKET VALUE</b>
<b>CURRENT ASSETS</b>		
TOTAL CASH	12,770	12,770
PREPAID EXPENSES	47,079	47,079
ACCOUNTS RECEIVABLE	17,039	17,039
<b>TOTAL CURRENT ASSETS</b>	<b>76,887</b>	<b>76,887</b>
<b>FIXED ASSETS</b>		
LAND	900,656	
LAND IMPROVEMENTS	497,361	
BUILDING	7,352,970	
FURNITURE	700,632	
FIXTURES & EQUIPMENT	2,523,795	
RESTAURANT EQUIPMENT	165,509	
SIGNS	165,021	
REORGANIZATION COSTS	269,763	
<b>TOTAL GROSS FIXED ASSETS</b>	<b>12,575,706</b>	
ACCUMULATED DEPR & AMORT	(10,094,461)	
<b>NET FIXED ASSETS</b>	<b>2,481,245</b>	<b>16,000,000</b>
<b>OTHER ASSETS</b>		
LOAN FEES	135,169	135,169
LINENS	47,418	47,418
FRANCHISE DEPOSIT	14,580	14,580
OTHER DEPOSITS / OTHER ASSETS	1,785	1,785
SUSPENSE	4,774	4,774
<b>TOTAL OTHER ASSETS</b>	<b>203,726</b>	<b>203,726</b>
<b>TOTAL ASSETS</b>	<b>\$ 2,761,858</b>	<b>\$ 16,280,614</b>
<b>LIABILITIES AND EQUITY</b>		
<b>CURRENT LIABILITIES</b>		
TRADE PAYABLE	265,014	265,014
TOTAL ACCRUED EXPENSES	127,804	127,804
<b>TOTAL CURRENT LIABILITIES</b>	<b>392,819</b>	<b>392,819</b>
<b>L-T LIABILITIES</b>		
N/P - EIDL	81,200	81,200
N/P - MORTGAGE	4,954,533	4,954,533
<b>TOTAL L-T LIABILITIES</b>	<b>5,035,733</b>	<b>5,035,733</b>
<b>OTHER LIABILITIES</b>		
OTHER LIABILITIES	104,977	104,977
<b>TOTAL OTHER LIABILITIES</b>	<b>104,977</b>	<b>104,977</b>
<b>TOTAL EQUITY</b>	<b>(2,771,670)</b>	<b>10,747,085</b>
<b>TOTAL LIABILITIES AND EQUITY</b>	<b>\$ 2,761,858</b>	<b>\$ 16,280,614</b>

**NOTES** (Substantially all disclosures omitted):

Internally prepared and not subjected to a compilation, review or audit; no assurance is provided.

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Yearend entries are not complete and are not expected to be material.

<b>Form 1065</b> Department of the Treasury Internal Revenue Service		<b>U.S. Return of Partnership Income</b> For calendar year 2019, or tax year beginning _____, 2019, ending _____, 20_____. ▶ Go to <a href="http://www.irs.gov/Form1065">www.irs.gov/Form1065</a> for instructions and the latest information.		OMB No. 1545-0123  <b>2019</b>	
<b>A</b> Principal business activity <b>MOTEL</b> <b>B</b> Principal product or service <b>LODGING</b> <b>C</b> Business code number <b>721110</b>		<b>Type or Print</b> <b>SHILO INN - IDAHO FALLS, LLC</b> <b>11707 NE AIRPORT WAY</b> <b>PORTLAND, OR 97220</b>		<b>D</b> Employer identification no. <b>82-0494815</b> <b>E</b> Date business started <b>10/01/1996</b> <b>F</b> Total assets (see instructions) <b>\$ 2,881,313.</b>	
<b>G</b> Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change (5) <input type="checkbox"/> Amended return <b>H</b> Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) _____ <b>I</b> Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year _____ <b>J</b> Check if Schedules C and M-3 are attached _____ <b>K</b> Check if partnership: (1) <input type="checkbox"/> Aggregated activities for section 465 at-risk purposes (2) <input type="checkbox"/> Grouped activities for section 469 passive activity purposes					
<b>Caution:</b> Include <b>only</b> trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.					
<b>I N C O M E</b>	<b>1 a</b> Gross receipts or sales		<b>1 a</b>	<b>2,097,360.</b>	
	<b>b</b> Returns and allowances		<b>1 b</b>		
	<b>c</b> Balance. Subtract line 1b from line 1a		<b>1 c</b>	<b>2,097,360.</b>	
	<b>2</b> Cost of goods sold (attach Form 1125-A)		<b>2</b>		
	<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b>	<b>2,097,360.</b>	
	<b>4</b> Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)		<b>4</b>		
	<b>5</b> Net farm profit (loss) (attach Schedule F (Form 1040 or 1040-SR))		<b>5</b>		
	<b>6</b> Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)		<b>6</b>		
<b>S E E  I N S T R U C T I O N S  D E D U C T I O N S  L I M I T A T I O N S</b>	<b>7</b> Other income (loss) (attach statement)		<b>7</b>		
	<b>8 Total income (loss).</b> Combine lines 3 through 7.		<b>8</b>	<b>2,097,360.</b>	
	<b>9</b> Salaries and wages (other than to partners) (less employment credits)		<b>9</b>	<b>665,604.</b>	
	<b>10</b> Guaranteed payments to partners		<b>10</b>		
	<b>11</b> Repairs and maintenance		<b>11</b>	<b>317,865.</b>	
	<b>12</b> Bad debts		<b>12</b>		
	<b>13</b> Rent		<b>13</b>	<b>6,699.</b>	
	<b>14</b> Taxes and licenses		<b>14</b>	<b>189,988.</b>	
	<b>15</b> Interest (see instructions)		<b>15</b>	<b>304,590.</b>	
	<b>16a</b> Depreciation (if required, attach Form 4562)		<b>16a</b>	<b>90,877.</b>	
	<b>b</b> Less depreciation reported on Form 1125-A and elsewhere on return		<b>16b</b>		
<b>T A X  A N D  P A Y M E N T</b>	<b>16c</b>		<b>16c</b>	<b>90,877.</b>	
	<b>17</b> Depletion (Do not deduct oil and gas depletion.)		<b>17</b>		
	<b>18</b> Retirement plans, etc.		<b>18</b>		
	<b>19</b> Employee benefit programs		<b>19</b>	<b>69.</b>	
	<b>20</b> Other deductions (att stmt)		<b>20</b>	<b>751,283.</b>	
	<b>21 Total deductions.</b> Add the amounts shown in the far right column for lines 9 through 20		<b>21</b>	<b>2,326,975.</b>	
	<b>22 Ordinary business income (loss).</b> Subtract line 21 from line 8.		<b>22</b>	<b>-229,615.</b>	
	<b>23</b> Interest due under the look-back method — completed long-term contracts (attach Form 8697)		<b>23</b>		
	<b>24</b> Interest due under the look-back method — income forecast method (attach Form 8866)		<b>24</b>		
	<b>25</b> BBA AAR imputed underpayment (see instructions)		<b>25</b>		
<b>26</b> Other taxes (see instructions)		<b>26</b>			
<b>27 Total balance due.</b> Add lines 23 through 26		<b>27</b>			
<b>28</b> Payment (see instructions)		<b>28</b>			
<b>29 Amount owed.</b> If line 28 is smaller than line 27, enter amount owed		<b>29</b>			
<b>30 Overpayment.</b> If line 28 is larger than line 27, enter overpayment		<b>30</b>			

**Sign Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member \_\_\_\_\_ Date \_\_\_\_\_

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No

**Paid Preparer Use Only**

Print/Type preparer's name  
**CHRISTOPHER CAMPBELL, CPA**

Firm's name ▶ **TASKAR, KIBBEE & ASSOCIATES, PC**

Firm's address ▶ **4900 SW GRIFFITH DR., STE 269**  
**BEAVERTON, OR 97005-2977**

Preparer's signature  
**CHRISTOPHER CAMPBELL, CPA**

Firm's EIN ▶ **47-5355616**

Phone no. **(503) 644-7933**

Date  
**9-10-2020**

Check ☐ if self-employed

PTIN  
**P01665658**

**Schedule B Other Information**

<b>1</b> What type of entity is filing this return? Check the applicable box:				<b>Yes</b>	<b>No</b>
<b>a</b> <input type="checkbox"/> Domestic general partnership	<b>b</b> <input type="checkbox"/> Domestic limited partnership				
<b>c</b> <input checked="" type="checkbox"/> Domestic limited liability company	<b>d</b> <input type="checkbox"/> Domestic limited liability partnership				
<b>e</b> <input type="checkbox"/> Foreign partnership	<b>f</b> <input type="checkbox"/> Other ▶				
<b>2</b> At the end of the tax year:					
<b>a</b> Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership .....				X	
<b>b</b> Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership .....				X	
<b>3</b> At the end of the tax year, did the partnership:					
<b>a</b> Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below. ....					X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock		
<b>b</b> Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below. ....					X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
<b>4</b> Does the partnership satisfy <b>all four</b> of the following conditions?				<b>Yes</b>	<b>No</b>
<b>a</b> The partnership's total receipts for the tax year were less than \$250,000.					
<b>b</b> The partnership's total assets at the end of the tax year were less than \$1 million.					
<b>c</b> Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
<b>d</b> The partnership is not filing and is not required to file Schedule M-3. .... If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					X
<b>5</b> Is this partnership a publicly traded partnership as defined in section 469(k)(2)? .....					X
<b>6</b> During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? .....					X
<b>7</b> Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? .....					X
<b>8</b> At any time during calendar year 2019, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country. ▶					X
<b>9</b> At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions. ....					X
<b>10a</b> Is the partnership making, or had it previously made (and not revoked), a section 754 election? .....					X
<b>b</b> Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions .....					X

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**Schedule B** **Other Information (continued)**

	Yes	No
<b>c</b> Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions		X
<b>11</b> Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
<b>12</b> At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
<b>13</b> If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions <input type="checkbox"/>		
<b>14</b> Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership. <input type="checkbox"/>		X
<b>15</b> Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return <input type="checkbox"/>		
<b>16a</b> Did you make any payments in 2019 that would require you to file Form(s) 1099? See instructions.	X	
<b>b</b> If "Yes," did you or will you file required Form(s) 1099?	X	
<b>17</b> Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, attached to this return. <input type="checkbox"/>		
<b>18</b> Enter the number of partners that are foreign governments under section 892. <input type="checkbox"/> 0		
<b>19</b> During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
<b>20</b> Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938.		X
<b>21</b> Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1T(b)(14)?		X
<b>22</b> During the tax year, did the partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions. If "Yes," enter the total amount of the disallowed deductions. <input type="checkbox"/> \$		
<b>23</b> Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions.	X	
<b>24</b> Does the partnership satisfy one or more of the following? See instructions.		X
<b>a</b> The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
<b>b</b> The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the partnership has business interest.		
<b>c</b> The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		
<b>25</b> Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions. If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III, line 3 <input type="checkbox"/>		X
If "No," complete Designation of Partnership Representative below.		

**Designation of Partnership Representative** (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR ☐ **MARK S. HEMSTREET**U.S. address of PR ☐ **11707 NE AIRPORT WAY  
PORTLAND, OR 97220**U.S. phone number of PR ☐ **(503) 644-7933**If the PR is an entity, name of the designated individual for the PR ☐U.S. address of designated individual ☐U.S. phone number of designated individual ☐

<b>26</b> Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? <input type="checkbox"/>		X
If "Yes," enter the amount from Form 8996, line 14 <input type="checkbox"/> \$		
<b>27</b> Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership. <input type="checkbox"/>		
<b>28</b> At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? <input type="checkbox"/>		X

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Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	-229,615.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach stmt)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4c	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income	5	82.
	6 Dividends and dividend equivalents: a Ordinary dividends b Qualified dividends 6b c Dividend equivalents 6c	6a	
	7 Royalties	7	
	8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8	
Deductions	9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a	
	b Collectibles (28%) gain (loss)	9b	
	c Unrecaptured section 1250 gain (attach statement)	9c	
	10 Net section 1231 gain (loss) (attach Form 4797)	10	
	11 Other income (loss) (see instructions) Type ▶	11	
	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type ▶ (2) Amount ▶	13c(2)	
	d Other deductions (see instructions) Type ▶ SEE STATEMENT 3	13d	32.
	Self-Employment	14a Net earnings (loss) from self-employment	14a
b Gross farming or fishing income		14b	
c Gross nonfarm income		14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type ▶	15d	
	e Other rental credits (see instructions) Type ▶	15e	
	f Other credits (see instructions) Type ▶	15f	
Foreign Transactions	16a Name of country or U.S. possession	16b	
	b Gross income from all sources	16c	
	c Gross income sourced at partner level		
	d Reserved for future use ▶ e Foreign branch category ▶	16e	
	f Passive category ▶ g General category ▶ h Other (att. stmt.) ▶	16h	
	Deductions allocated and apportioned at partner level		
	i Interest expense ▶ j Other ▶	16j	
	Deductions allocated and apportioned at partnership level to foreign source income		
	k Reserved for future use ▶ l Foreign branch category ▶	16l	
	m Passive category ▶ n General category ▶ o Other (att. stmt.) ▶	16o	
	p Total foreign taxes (check one): ▶ Paid <input type="checkbox"/> Accrued <input type="checkbox"/>	16p	
	q Reduction in taxes available for credit (attach statement)	16q	
	r Other foreign tax information (attach statement)		
	Alternative Minimum Tax (AMT) Items	17a Post-1986 depreciation adjustment	17a
b Adjusted gain or loss		17b	
c Depletion (other than oil and gas)		17c	
d Oil, gas, and geothermal properties — gross income		17d	
e Oil, gas, and geothermal properties — deductions		17e	
f Other AMT items (attach stmt)		17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses SEE STATEMENT 4	18c	65,008.
	19a Distributions of cash and marketable securities	19a	353,982.
	b Distributions of other property	19b	
	20a Investment income	20a	82.
	b Investment expenses	20b	
	c Other items and amounts (attach stmt)		

**Analysis of Net Income (Loss)**

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16p.						1	-229,565.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other	
a General partners.							
b Limited partners.		-229,565.					

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1 Cash.			102,689.		9,544.
2a Trade notes and accounts receivable.		13,961.		12,690.	
b Less allowance for bad debts.			13,961.		12,690.
3 Inventories.					
4 U.S. government obligations.					
5 Tax-exempt securities.					
6 Other current assets (attach stmt) SEE ST 5.			300,810.		77,690.
7a Loans to partners (or persons related to partners).					
b Mortgage and real estate loans.					
8 Other investments (attach stmt).					
9a Buildings and other depreciable assets.		11,392,164.		11,407,464.	
b Less accumulated depreciation.		9,754,491.	1,637,673.	9,845,400.	1,562,064.
10a Depletable assets.					
b Less accumulated depletion.					
11 Land (net of any amortization).			900,656.		900,656.
12a Intangible assets (amortizable only).		135,169.		135,169.	
b Less accumulated amortization.		42,804.	92,365.	56,321.	78,848.
13 Other assets (attach stmt) SEE ST 6.			304,593.		239,821.
14 Total assets.			3,352,747.		2,881,313.
<b>Liabilities and Capital</b>					
15 Accounts payable.			271,839.		583,227.
16 Mortgages, notes, bonds payable in less than 1 year.					
17 Other current liabilities (attach stmt) SEE ST 7.			552,953.		481,093.
18 All nonrecourse loans.					
19a Loans from partners (or persons related to partners).					
b Mortgages, notes, bonds payable in 1 year or more.			5,016,940.		4,954,533.
20 Other liabilities (attach stmt).					
21 Partners' capital accounts.			-2,488,985.		-3,137,540.
22 Total liabilities and capital.			3,352,747.		2,881,313.

**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return****Note:** The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books.	-294,573.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest .. \$	
3 Guaranteed payments (other than health insurance).		7 Deductions included on Schedule K, lines 1 through 13d, and 16p, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 16p (itemize):		a Depreciation .. \$	
a Depreciation .. \$		8 Add lines 6 and 7.	
b Travel and entertainment .. \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5.	-229,565.
STATEMENT 8 65,008.	65,008.		
5 Add lines 1 through 4.	-229,565.		

**Schedule M-2 Analysis of Partners' Capital Accounts**

1 Balance at beginning of year.	-2,488,985.	6 Distributions: a Cash.	353,982.
2 Capital contributed: a Cash.		b Property.	
b Property.		7 Other decreases (itemize):	
3 Net income (loss) per books.	-294,573.	8 Add lines 6 and 7.	353,982.
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5.	-3,137,540.
5 Add lines 1 through 4.	-2,783,558.		

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Form 1065 (2019)

1  
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7  
8 UNITED STATES BANKRUPTCY COURT  
9 WESTERN DISTRICT OF WASHINGTON  
AT TACOMA

10 In re:

Case No. 20-\_\_\_\_\_

11 SHILO INN, IDAHO FALLS, LLC,

Declaration of Mark S. Hemstreet  
Regarding Small Business Debtor  
Compliance

12 Debtor and Debtor-in-Possession,  
13 \_\_\_\_\_

14 I, Mark S. Hemstreet, hereby declare as follows:

15 1. I am over 18 years of age. I have personal knowledge of the facts set forth below  
16 and, if called to testify, would and could competently testify thereto.

17 2. I am the founder of the Shilo Inn Suites Hotel chain, which I founded in 1974. I  
18 have over 46 years of business experience in the hotel management and hospitality industry. I  
19 started my education in the hospitality industry when I was 16 years old, managing a motel during  
20 the summer of 1966. After graduating from Beaverton High School in 1968 and then putting  
21 myself through two years of College at Portland State University, I decided that I wanted to devote  
22 myself fulltime to learning all aspects of the construction, development, hotel, and hospitality  
23 business and started working fulltime with my father until I branched out on my own to start my  
24 independent Shilo Inn hospitality company, in 1974.

25 3. I own 99% of the membership interests in Shilo Inn, Idaho Falls, LLC the "Debtor")  
26 the debtor and debtor in possession in the above-captioned chapter 11 bankruptcy case.

DECLARATION OF MARK S. HEMSTREET REGARDING  
SMALL BUSINESS DEBTOR COMPLIANCE- 1

**STOEL RIVES LLP**  
ATTORNEYS

600 University Street, Suite 3600, Seattle, WA 98101  
Telephone 206.624.0900

4 I declare under penalty of perjury under the laws of the United States of America that the  
5 foregoing is true and correct to the best of my knowledge.

DocuSigned by:  
Mark S. Hemstreet  
2220B0C135G3A4B2...  
MARK S. HEMSTREET

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